

ĺ	Thereby	certify that t	his transmittal of the below de	escribed document is bein	g deposited with the United S	tates Postal Servic	e in an envelope						
	of deposit Date of Deposit:			Julie Williams	Signature of the Person Making the Deposit:		Warrs						
	In re A	pplicatior	n of: Lup San Leong,	Feng Chen and Cha	ırles Lin	U							
	Serial I	No.: 09/	904,828	Examiner: Eley	T.								
	Filed:	07/12/	01	Art Unit: 3724			RECEIVED						
	For: POLISHING APPARATUS AND METHOD FOR FORMING AN INTEGRATED CIRCUIT OCT 2 0												
		issioner f ox 1450	or Patents			TEC	CHNOLOGY CENTER R370						
	Alexandria, VA 22313-1450 AMENDMENT AND RESPONSE TO OFFICE ACTION TRANSMITTAL												
	1	•											
	1.	Transmitted herewith is an amendment for this application											
	Other: 2. Applicant is other than a small entity												
		Extension of Term											
	3.	The pro	roceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.										
	(a)	[X]	Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)										
			Extension [X] one mor [] two month [] three mor [] four month	ns oths	<u>Fee</u> \$110.00 \$420.00 \$950.00 \$1,480.00								
					Fee \$110.00								
	If an ac	If an additional extension of time is required, please consider this a petition therefor.											
	(b) [] Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.												
/2003	SSESHE1	00000085	09904828										
:1251			110.00 GP										

Fee Calculation

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

(for other than a small entity)										
Fee Items	Claims Remaining After Amendment	Highest Number of Claims Previously Paid For	Present Extra Claims	Fee Rate	Total					
Total Claims	9	- 38 =	0	x \$18.00	\$0.00					
Independent Claims	1	- 3 =	0	x \$86.00	\$0.00					
Multiple Dependent Claim Fee (one or more, first added by this \$290.00 amendment)										
Total Fees										

PAYMENT OF FEES

- 5. The full fee due in connection with this communication is provided as follows:
- [X] The Commissioner is hereby authorized to charge any additional fees associated with this communication or credit any overpayment to Deposit Account No.: 23-0085.

 A duplicate copy of this authorization is enclosed.
- [X] A check in the amount of \$110.00
- [] Charge any fees required or credit any overpayments associated with this filing to Deposit Account No.: 23-0085.

Please direct all correspondence concerning the above-identified application to the following address:

WAGNER, MURABITO & HAO LLP

Two North Market Street, Third Floor San Jose, California 95113 (408) 938-9060

Respectfully submitted,

Date: 10/6/03

John P. Wagner, Jr. Reg. No. 35,398